

Fill in this information to identify your case and this filing:

Debtor 1	Veronica	Saenz	
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	Southern District of Texas		
Case number	22-20164		

Check if this is an amended filing

Official Form 106A/B

Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?

No. Go to Part 2.

Yes. Where is the property?

1.1 PARADE PLACE #2 BLK 3 LOT 13

Street address, if available, or other description

525 Poenisch Dr

Corpus Christi, TX 78412

City State ZIP Code

Nueces

County

What is the property? Check all that apply.

- Single-family home
- Duplex or multi-unit building
- Condominium or cooperative
- Manufactured or mobile home
- Land
- Investment property
- Timeshare
- Other _____

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property?

\$231,657.00

Current value of the portion you own?

\$231,657.00

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

Homestead

Check if this is community property
(see instructions)

Who has an interest in the property? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number: _____

Source of Value: Nueces County Tax Office

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.....

→ \$231,657.00

Debtor 1

Veronica

First Name

Saenz

Middle Name

Last Name

Case number (if known) 22-20164**Part 2: Describe Your Vehicles**

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles

- No
 Yes

4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories

Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

- No
 Yes

5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here.....

→ \$0.00

Part 3: Describe Your Personal and Household Items**Do you own or have any legal or equitable interest in any of the following items?**

Current value of the portion you own?
 Do not deduct secured claims or exemptions.

6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

- No
 Yes. Describe.....

sofa(s), loveseat(s), entertainment center / tv cabinet, coffee table, end tables, kitchen table, dining table, refrigerator / freezer, stove , microwave , washing machine, clothes dryer, pots / pans / cookware, bed, dresser(s) / nightstand(s), lamps / accessories, lawnmower, yard /landscaping tools

\$2,500.00

7. Electronics

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

- No
 Yes. Describe.....

television 1, dvd player, video game system, cellular telephones

\$500.00

8. Collectibles of value

Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

- No
 Yes. Describe.....

books, compact discs

\$100.00

9. Equipment for sports and hobbies

Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments

- No
 Yes. Describe.....

10. Firearms

Examples: Pistols, rifles, shotguns, ammunition, and related equipment

- No
 Yes. Describe.....

Debtor 1

Veronica

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Case number (if known) 22-20164**11. Clothes***Examples:* Everyday clothes, furs, leather coats, designer wear, shoes, accessories No Yes. Describe.....

Clothes

\$600.00

12. Jewelry*Examples:* Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No Yes. Describe.....**13. Non-farm animals***Examples:* Dogs, cats, birds, horses No Yes. Describe.....**14. Any other personal and household items you did not already list, including any health aids you did not list** No Yes. Describe.....**15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached
for Part 3. Write that number here..... →**

\$3,700.00

Part 4: Describe Your Financial Assets**Do you own or have any legal or equitable interest in any of the following?****Current value of the
portion you own?
Do not deduct secured
claims or exemptions.****16. Cash***Examples:* Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition No Yes.....

Cash.....

\$25.00

17. Deposits of money*Examples:* Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. No Yes.....

Institution name:

17.1. Checking account:

Bank of America Checking Acct. #0866

\$859.81

17.2. Checking account:

Bank of America Checking Acct. #0853

\$0.00

Debtor 1	Veronica	Saenz	Case number (if known) <u>22-20164</u>
	First Name	Middle Name	Last Name

17.3. Savings account: _____

17.4. Savings account: _____

17.5. Certificates of deposit: _____

17.6. Other financial account: _____

17.7. Other financial account: _____

17.8. Other financial account: _____

17.9. Other financial account: _____

18. Bonds, mutual funds, or publicly traded stocks*Examples:* Bond funds, investment accounts with brokerage firms, money market accounts No Yes.....Institution or issuer name:

_____**19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture** No Yes. Give specific information about them.....

Name of entity: _____ % of ownership: _____

20. Government and corporate bonds and other negotiable and non-negotiable instruments*Negotiable instruments* include personal checks, cashiers' checks, promissory notes, and money orders.*Non-negotiable instruments* are those you cannot transfer to someone by signing or delivering them. No Yes. Give specific information about them.....Issuer name:

_____**21. Retirement or pension accounts***Examples:* Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans No Yes. List each account separately.

Type of account: _____ Institution name: _____

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Case number (if known) 22-20164**26. Patents, copyrights, trademarks, trade secrets, and other intellectual property***Examples:* Internet domain names, websites, proceeds from royalties and licensing agreements No Yes. Give specific information about them....

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27. Licenses, franchises, and other general intangibles*Examples:* Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses No Yes. Give specific information about them....

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Money or property owed to you?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

28. Tax refunds owed to you No Yes. Give specific information about them, including whether you already filed the returns and the tax years.....

	Federal:	
	State:	
	Local:	

29. Family support*Examples:* Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement No Yes. Give specific information.....

	Alimony:	
	Maintenance:	
	Support:	
	Divorce settlement:	
	Property settlement:	

30. Other amounts someone owes you*Examples:* Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else No Yes. Give specific information.....

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31. Interests in insurance policies*Examples:* Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No Yes. Name the insurance company of each policy and list its value....

Company name:

Beneficiary:

Surrender or refund value:

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Debtor 1

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Case number (if known) 22-20164**32. Any interest in property that is due you from someone who has died**

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

 No Yes. Give specific information.....

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33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment

Examples: Accidents, employment disputes, insurance claims, or rights to sue

 No Yes. Describe each claim.....

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34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims No Yes. Describe each claim.....

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35. Any financial assets you did not already list No Yes. Give specific information.....

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36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here..... →**\$47,402.61****Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.****37. Do you own or have any legal or equitable interest in any business-related property?** No. Go to Part 6. Yes. Go to line 38.

Current value of the portion you own?
Do not deduct secured claims or exemptions.

38. Accounts receivable or commissions you already earned No Yes. Describe.....

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39. Office equipment, furnishings, and supplies

Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices

 No Yes. Describe.....

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Debtor 1

Veronica

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Case number (if known) 22-20164**40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade** No Yes. Describe.....

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41. Inventory No Yes. Describe.....

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42. Interests in partnerships or joint ventures No Yes. Describe.....

Name of entity:

% of ownership:

_____ %

43. Customer lists, mailing lists, or other compilations No Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))? No Yes. Describe.....

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44. Any business-related property you did not already list No Yes. Give specific information.....

45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here..... →**\$0.00**

Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.
If you own or have an interest in farmland, list it in Part 1.

46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. Yes. Go to line 47.

Current value of the portion you own?
 Do not deduct secured claims or exemptions.

47. Farm animals

Examples: Livestock, poultry, farm-raised fish

 No Yes.....

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Debtor 1

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Case number (if known) 22-20164**48. Crops—either growing or harvested** No Yes. Give specific information.....

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49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade No Yes.....

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50. Farm and fishing supplies, chemicals, and feed No Yes.....

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51. Any farm- and commercial fishing-related property you did not already list No Yes. Give specific information.....

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52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here..... →\$0.00**Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above****53. Do you have other property of any kind you did not already list?**

Examples: Season tickets, country club membership

 No Yes. Give specific information.....

54. Add the dollar value of all of your entries from Part 7. Write that number here..... →\$0.00**Part 8: List the Totals of Each Part of this Form****55. Part 1: Total real estate, line 2..... →**\$231,657.00**56. Part 2: Total vehicles, line 5** \$0.00**57. Part 3: Total personal and household items, line 15** \$3,700.00**58. Part 4: Total financial assets, line 36** \$47,402.61**59. Part 5: Total business-related property, line 45** \$0.00**60. Part 6: Total farm- and fishing-related property, line 52** \$0.00

Debtor 1

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Case number (if known) 22-2016461. Part 7: Total other property not listed, line 54 + \$0.0062. Total personal property. Add lines 56 through 61..... \$51,102.61 Copy personal property total → + \$51,102.6163. Total of all property on Schedule A/B. Add line 55 + line 62..... \$282,759.61

Fill in this information to identify your case:

Debtor 1	<u>Veronica</u>	<u>Saenz</u>	
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Southern District of Texas</u>		
Case number (if known)	<u>22-20164</u>		

Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

04/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

1. You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on *Schedule A/B* that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
		<i>Check only one box for each exemption.</i>	
Brief description: PARADE PLACE #2 BLK 3 LOT 13 525 Poenisch Dr Corpus Christi, TX 78412	\$231,657.00	<input checked="" type="checkbox"/> \$0.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Const. art. 16 §§ 50, 51, Texas Prop. Code §§ 41.001-.002
Line from Schedule A/B: 1.1			
Brief description: sofa(s), loveseat(s), entertainment center / tv cabinet, coffee table, end tables, kitchen table, dining table, refrigerator / freezer, stove , microwave , washing machine, clothes dryer, pots / pans / cookware, bed, dresser(s) / nightstand(s), lamps / accessories, lawnmower, yard /landscaping tools	\$2,500.00	<input checked="" type="checkbox"/> \$2,500.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Tex. Prop. Code §§ 42.001(a), 42.002(a)(1)
Line from Schedule A/B: 6			

Debtor 1

Veronica Saenz
First Name Middle Name Last Name

Case number (if known) 22-20164

Part 2: Additional Page

3. Are you claiming a homestead exemption of more than \$189,050?

(Subject to adjustment on 4/01/25 and every 3 years after that for cases filed on or after the date of adjustment.)

 No Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? No Yes

Debtor 1

Veronica

First Name

Saenz

Middle Name

Last Name

Case number (if known) 22-20164

Part 2: Additional Page

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption.	Specific laws that allow exemption
Brief description: <u>television 1, dvd player, video game system, cellular telephones</u>	<u>\$500.00</u>	<input checked="" type="checkbox"/> \$500.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>Tex. Prop. Code §§ 42.001(a), 42.002(a)(1)</u> _____ _____
Line from Schedule A/B: <u>7</u>			
Brief description: <u>books, compact discs</u>	<u>\$100.00</u>	<input checked="" type="checkbox"/> \$100.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>Tex. Prop. Code §§ 42.001(a), 42.002(a)(1)</u> _____ _____
Line from Schedule A/B: <u>8</u>			
Brief description: <u>Clothes</u>	<u>\$600.00</u>	<input checked="" type="checkbox"/> \$600.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>Tex. Prop. Code §§ 42.001(a), 42.002(a)(5)</u> _____ _____
Line from Schedule A/B: <u>11</u>			
Brief description: <u>Retirement account</u>	<u>\$46,517.80</u>	<input checked="" type="checkbox"/> \$46,517.80 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>Tex. Prop. Code § 42.0021</u> _____ _____
Line from Schedule A/B: <u>21</u>			

IN RE: Saenz, Veronica

CASE NO 22-20164

CHAPTER Chapter 13

SCHEDULE C-1 (SUPPLEMENTAL EXEMPTION ANALYSIS)

Exemption Totals by Category:

(Values and liens of surrendered property are NOT included in this section)

Scheme Selected: **State**

No.	Category	Gross Property Value	Total Encumbrances	Total Equity	Total Amount Exempt	Total Amount Non-Exempt
1.	Real Estate	\$231,657.00	\$231,657.00	\$0.00	\$0.00	\$0.00
3.	Motor vehicle	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
4.	Watercraft, trailers, motors homes, and accessories	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
6.	Household goods and furnishings	\$2,500.00	\$0.00	\$2,500.00	\$2,500.00	\$0.00
7.	Electronics	\$500.00	\$0.00	\$500.00	\$500.00	\$0.00
8.	Collectibles of value	\$100.00	\$0.00	\$100.00	\$100.00	\$0.00
9.	Equipment for sports and hobbies	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
10.	Firearms	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
11.	Clothes	\$600.00	\$0.00	\$600.00	\$600.00	\$0.00
12.	Jewelry	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
13.	Nonfarm animals	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
14.	Other	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
16.	Cash	\$25.00	\$0.00	\$25.00	\$0.00	\$25.00
17.	Deposits of money	\$859.81	\$0.00	\$859.81	\$0.00	\$859.81
18.	Bonds, mutual funds, or publicly traded stocks	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
19.	Business Interests, LLC's, Partnerships, Joint Ventures and Nonpublicly traded stock	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
20.	Bonds and other financial instruments	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
21.	Retirement or pension accounts	\$46,517.80	\$0.00	\$46,517.80	\$46,517.80	\$0.00
22.	Security deposits and prepayments	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
23.	Annuities	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
24.	Interest in a qualified education fund, such as an education IRA	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
25.	Trusts, equitable or future interests in property	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
26.	Copyrights, trademarks, websites and other intellectual property	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
27.	Licenses, Franchises, and other general intangibles	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
28.	Tax refunds	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
29.	Family support	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
30.	Other amounts owed to the debtor	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
31.	Insurance policies	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
32.	Interest in property from deceased	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
33.	Claims against third parties	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

IN RE: Saenz, Veronica

CASE NO 22-20164

CHAPTER Chapter13

SCHEDULE C-1 (SUPPLEMENTAL EXEMPTION ANALYSIS)

Continuation Sheet #1

Exemption Totals by Category:

(Values and liens of surrendered property are NOT included in this section)

Scheme Selected: **State**

No.	Category	Gross Property Value	Total Encumbrances	Total Equity	Total Amount Exempt	Total Amount Non-Exempt
34.	All other claims, includes contingent/unliquidated claims, counter claims, and creditor set offs	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
35.	Other financial asset	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
38.	Accounts receivable	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
39.	Office equipment, furnishings, and supplies	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
40.	Machinery, fixtures and equipment	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
41.	Inventory	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
42.	Interests in partnerships or joint ventures	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
43.	Customer lists	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
44.	Other businessrelated property	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
47.	Farm animals	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
48.	Crops	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
49.	Equipment	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
50.	Supplies	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
51.	Other farm or fishing related property	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
53.	Other Assets	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
TOTALS:		\$282,759.61	\$231,657.00	\$51,102.61	\$50,217.80	\$884.81

IN RE: Saenz, Veronica

CASE NO 22-20164

CHAPTER Chapter13

SCHEDULE C-1 (SUPPLEMENTAL EXEMPTION ANALYSIS)

Continuation Sheet #2

Surrendered Property:

The following property is to be surrendered by the debtor. Although this property is NOT exempt, it is NOT considered "non-exempt" for purposes of this analysis. The below listed items are to be returned to the lienholder

Property Description	Market Value	Lien	Equity
<u>Real Property</u>			
(None)			
<u>Personal Property</u>			
(None)			
TOTALS:	\$0.00	\$0.00	\$0.00

Non-exempt Property by Item:

The following property, or a portion thereof, is non-exempt.

Property Description	Market Value	Lien	Equity	Non-Exempt Amount
<u>Real Property</u>				
(None)				
<u>Personal Property</u>				
Cash	\$25.00		\$25.00	\$25.00
Bank of America Checking Acct. #0866	\$859.81		\$859.81	\$859.81
Checking account				
TOTALS:	\$282,759.61	\$231,657.00	\$51,102.61	\$884.81

Summary	
A. Gross Property Value (not including surrendered property)	\$282,759.61
B. Gross Property Value of Surrendered Property	\$0.00
C. Total Gross Property Value (A+B)	\$282,759.61
D. Gross Amount of Encumbrances (not including surrendered property)	\$231,657.00
E. Gross Amount of Encumbrances on Surrendered Property	\$0.00
F. Total Gross Encumbrances (D+E)	\$231,657.00
G. Total Equity (not including surrendered property) / (A-D)	\$51,102.61
H. Total Equity in surrendered items (B-E)	\$0.00
I. Total Equity (C-F)	\$51,102.61
J. Total Exemptions Claimed	\$50,217.80
K. Total Non-Exempt Property Remaining (G-J)	\$884.81

Fill in this information to identify your case:

Debtor 1	<u>Veronica</u>	<u>Saenz</u>	
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Southern District of Texas</u>		
Case number (if known)	<u>22-20164</u>		

Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

1. Do any creditors have claims secured by your property?

No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.

Yes. Fill in all of the information below.

Part 1: List All Secured Claims

2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

Column A	Column B	Column C
Amount of claim	Value of collateral that supports this claim	Unsecured portion if any

2.1	<u>ARCPE 1,LLC</u> Creditor's Name <u>Attn: John Olsen</u> <u>1900 Sunset Harbour Dr 2nd Floor</u> Number Street <u>Miami Beach, FL 33139</u> City State ZIP Code	Describe the property that secures the claim: PARADE PLACE #2 BLK 3 LOT 13 525 Poenisch Dr Corpus Christi, TX 78412	\$30,000.00	\$231,657.00	\$0.00
	As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Nature of lien: Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset)			
	Date debt was incurred	Last 4 digits of account number <u>5 5 2 1</u>			
	Remarks: 2nd Lien on mortgage - to be paid through debtor's plan				
	Add the dollar value of your entries in Column A on this page. Write that number here:	\$30,000.00			

Debtor 1

Veronica Saenz
 First Name Middle Name Last Name

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Part 1:

Additional Page

After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.

Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion if any
--	---	---

2.2 PHH MORTGAGE Creditor's Name <u>PO BOX 5452</u> Number Street Mount Laurel, NJ 08054 City State ZIP Code	Describe the property that secures the claim: PARADE PLACE #2 BLK 3 LOT 13 525 Poenisch Dr Corpus Christi, TX 78412	\$210,680.05	\$231,657.00	\$0.00
Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt	As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed			
Date debt was incurred	Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset)			
Last 4 digits of account number <u>3 5 9 6</u>				
Remarks: 1st lien - to be paid direct by the debtor- Debtor is currently under a trial modification plan.				
Add the dollar value of your entries in Column A on this page. Write that number here:		\$210,680.05		
If this is the last page of your form, add the dollar value totals from all pages. Write that number here:		\$240,680.05		

Debtor 1

Veronica Saenz
 First Name Middle Name Last Name

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Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

<input type="checkbox"/> 1 HUGHES, WATTERS & ASKANASE, LLP Name <u>1201 Louisiana 28th Floor</u> Number Street <u>Anthony A. Garcia</u> <u>Houston, TX 77002</u> City	On which line in Part 1 did you enter the creditor? <u>1</u> Last 4 digits of account number <u>J P 2 1</u>
State <u>TX</u> ZIP Code <u>77002</u>	

Fill in this information to identify your case:

Debtor 1	Veronica	Saenz	
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	Southern District of Texas		
Case number (if known)	22-20164		

Check if this is an amended filing

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Property* (Official Form 106A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G). Do not include any creditors with partially secured claims that are listed in *Schedule D: Creditors Who Hold Claims Secured by Property*. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

Part 1: List All of Your PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims against you?

- No. Go to Part 2.
 Yes.

2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

	Total claim	Priority amount	Nonpriority amount
2.1 Raub Law Firm Priority Creditor's Name	\$2,349.00	\$2,349.00	\$0.00
814 Leopard Number Street	Last 4 digits of account number		
Corpus Christi, TX 78401 City State ZIP Code	When was the debt incurred?		
Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply.		
<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Is the claim subject to offset?	Type of PRIORITY unsecured claim:		
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<input type="checkbox"/> Domestic support obligations <input type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input checked="" type="checkbox"/> Other. Specify Attorney Fees		

Debtor 1

Veronica

First Name

Saenz

Middle Name

Last Name

Case number (if known) 22-20164

Part 1: Your PRIORITY Unsecured Claims - Continuation Page

After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.

Total claim	Priority amount	Nonpriority amount
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2.2	<u>Raub Law Firm</u> Priority Creditor's Name <u>814 Leopard</u> Number Street <u>Corpus Christi, TX 78401</u> City State ZIP Code	Last 4 digits of account number _____ When was the debt incurred? As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$2,000.00 \$2,000.00 \$0.00
		Type of PRIORITY unsecured claim: <input type="checkbox"/> Domestic support obligations <input type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input checked="" type="checkbox"/> Other. Specify Administrative Priority	
Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt			
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
Remarks: POST CONFIRMATION ATTY FEES			

Debtor 1

Veronica

First Name

Saenz

Middle Name

Last Name

Case number (if known) 22-20164

Part 2: List All of Your NONPRIORITY Unsecured Claims

3. Do any creditors have nonpriority unsecured claims against you?

- No. You have nothing to report in this part. Submit this form to the court with your other schedules.
 Yes.

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

		Total claim	
4.1	AVANT LLC/WEB BANK Nonpriority Creditor's Name <u>222 N LASALLE ST STE 160</u> Number Street <u>CHICAGO, IL 60601</u> City State ZIP Code	Last 4 digits of account number <u>4XXX</u> When was the debt incurred? <u>08/23/2021</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>credit card</u>	<u>\$1,500.00</u>
4.2	CAPITAL ONE Nonpriority Creditor's Name <u>PO BOX 31293</u> Number Street <u>SALT LAKE CITY, UT 84131</u> City State ZIP Code	Last 4 digits of account number <u>XXXX</u> When was the debt incurred? <u>07/12/2019</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>credit card</u>	<u>\$532.00</u>
4.3	COMENITYCAPITAL/ACADMY Nonpriority Creditor's Name <u>PO BOX 182120</u> Number Street <u>COLUMBUS, OH 43218</u> City State ZIP Code	Last 4 digits of account number <u>XXXX</u> When was the debt incurred? <u>01/23/2020</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>credit card</u>	<u>\$1,330.00</u>

Debtor 1

Veronica

First Name

Saenz

Middle Name

Last Name

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Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.

Total claim

4.4 CREDIT MANAGEMENT LP
 Nonpriority Creditor's Name
6080 TENNYSON PKWY STE 1
 Number Street
PLANO, TX 75024
 City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

- No
 Yes

Last 4 digits of account number 5073\$4,070.00When was the debt incurred? 02/04/2021

As of the date you file, the claim is: Check all that apply.

- Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

- Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify
Collection Attorney

4.5 FIG LOANS TEXAS LLC
 Nonpriority Creditor's Name
335 MADISON AVE FLOOR 16
 Number Street
NEW YORK, NY 10016
 City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

- No
 Yes

Last 4 digits of account number 6463\$390.00When was the debt incurred? 01/27/2022

As of the date you file, the claim is: Check all that apply.

- Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

- Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify
Unsecured

4.6 FIRST PREMIER BANK
 Nonpriority Creditor's Name
3820 N LOUISE AVE
 Number Street
SIOUX FALLS, SD 57107
 City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

- No
 Yes

Last 4 digits of account number 4326\$489.00When was the debt incurred? 10/27/2016

As of the date you file, the claim is: Check all that apply.

- Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

- Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify
CreditCard

Debtor 1

Veronica

First Name

Middle Name

Saenz

Last Name

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Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.

Total claim

4.7	Goldstar Nonpriority Creditor's Name 6601 Everhart Number Street Corpus Christi, TX 78413 City State ZIP Code	Last 4 digits of account number <u>XXXX</u> When was the debt incurred? <u>08/19/2021</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify other	<u>\$2,201.00</u>
4.8	KOHLS/CAPONE Nonpriority Creditor's Name N56 RIDGEWOOD DR Number Street MENOMONEE FAL, WI 53051 City State ZIP Code	Last 4 digits of account number <u>XXXX</u> When was the debt incurred? <u>12/03/2020</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify credit card	<u>\$440.00</u>
4.9	LACKS VALLEY STORES LT Nonpriority Creditor's Name 1300 SAN PATRICIA DR Number Street PHARR, TX 78577 City State ZIP Code	Last 4 digits of account number <u>XXXX</u> When was the debt incurred? <u>12/14/2019</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify other	<u>\$1,894.00</u>

Debtor 1

Veronica

First Name

Saenz

Middle Name

Last Name

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Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.

Total claim

4.10	LVNV FUNDING LLC Nonpriority Creditor's Name PO BOX 1269 Number Street GREENVILLE, SC 29602 City State ZIP Code	Last 4 digits of account number <u>9380</u> When was the debt incurred? <u>05/29/2019</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify FactoringCompanyAccount	\$199.00
4.11	LVNV FUNDING LLC Nonpriority Creditor's Name PO BOX 1269 Number Street GREENVILLE, SC 29602 City State ZIP Code	Last 4 digits of account number <u>XXXX</u> When was the debt incurred? <u>07/17/2017</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify credit card	\$703.00
4.12	MONTGOMERY WARD Nonpriority Creditor's Name 1112 7TH AVE Number Street MONROE, WI 53566 City State ZIP Code	Last 4 digits of account number <u>XXXX</u> When was the debt incurred? <u>04/17/2020</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify credit card	\$953.00

Debtor 1

Veronica

First Name

Saenz

Middle Name

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Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.

Total claim

4.13	NATIONAL CREDIT ADJUST Nonpriority Creditor's Name 327 W 4TH AVE Number Street HUTCHINSON, KS 67501 City State ZIP Code	Last 4 digits of account number <u>9359</u> When was the debt incurred? <u>11/15/2019</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify FactoringCompanyAccount	<u>\$101.00</u>
4.14	Navy Army Community Credit Union Nonpriority Creditor's Name 4802 Crosstown Expy Number Street Corpus Christi, TX 78415 City State ZIP Code	Last 4 digits of account number <u>3033</u> When was the debt incurred? <u>12/20/2020</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify other	<u>\$18,832.00</u>
4.15	Navy Army Community Credit Union Nonpriority Creditor's Name 4802 Crosstown Expy Number Street Corpus Christi, TX 78415 City State ZIP Code	Last 4 digits of account number <u>9459</u> When was the debt incurred? <u>07/19/2019</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify other	<u>\$5,247.00</u>

Debtor 1

Veronica

First Name

Saenz

Middle Name

Last Name

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Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.

Total claim

4.16	POSSIBLE FINANCIAL INC Nonpriority Creditor's Name 500 YALE AVE. N Number Street SEATTLE, WA 98109 City State ZIP Code	Last 4 digits of account number <u>XXXX</u>	<u>\$15.00</u>
Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt		When was the debt incurred? <u>05/01/2021</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Unsecured	
4.17	RMP SRVC LLC Nonpriority Creditor's Name 200 N. NEW ROAD Number Street WACO, TX 76702 City State ZIP Code	Last 4 digits of account number <u>8341</u>	<u>\$50.00</u>
Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt		When was the debt incurred? <u>03/15/2019</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Unsecured	
4.18	SECURITY FINANCE Nonpriority Creditor's Name C/O SECURITY FINANCE Number Street SPARTANBURG, SC 29304 City State ZIP Code	Last 4 digits of account number <u>3746</u>	<u>\$468.00</u>
Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt		When was the debt incurred? <u>04/23/2021</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Unsecured	

Debtor 1

Veronica

First Name

Middle Name

Saenz

Last Name

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Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.

Total claim

4.19	SYNCB/JCP Nonpriority Creditor's Name PO BOX 965007 Number Street ORLANDO, FL 32896 City State ZIP Code	Last 4 digits of account number <u>XXXX</u>	<u>\$521.00</u>
Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt		When was the debt incurred? <u>08/27/2021</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify credit card	
4.20	SYNCB/SAMS CLUB Nonpriority Creditor's Name PO BOX 965005 Number Street ORLANDO, FL 32896 City State ZIP Code	Last 4 digits of account number <u>XXXX</u>	<u>\$476.00</u>
Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt		When was the debt incurred? <u>11/07/2021</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify credit card	
4.21	TBOM/ATLS/ASPIRE Nonpriority Creditor's Name 5 CONCOURSE PKWY STE 400 Number Street ATLANTA, GA 30328 City State ZIP Code	Last 4 digits of account number <u>XXXX</u>	<u>\$1,574.00</u>
Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt		When was the debt incurred? <u>08/13/2021</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify credit card	

Debtor 1

Veronica

First Name

Saenz

Middle Name

Last Name

Case number (if known) 22-20164

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.

Total claim

4.22	TBOM/MILESTONE Nonpriority Creditor's Name PO BOX 4499 Number Street BEAVERTON, OR 97076 City State ZIP Code	Last 4 digits of account number <u>XXXX</u>	<u>\$68.00</u>
Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt		When was the debt incurred? <u>09/16/2021</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify credit card	
4.23	THD/CBNA Nonpriority Creditor's Name PO BOX 6497 Number Street SIOUX FALLS, SD 57117 City State ZIP Code	Last 4 digits of account number <u>XXXX</u>	<u>\$1,082.00</u>
Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt		When was the debt incurred? <u>12/13/2019</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify credit card	
4.24	THE HOME DEPOT/CBNA Nonpriority Creditor's Name PO BOX 6497 Number Street SIOUX FALLS, SD 57117 City State ZIP Code	Last 4 digits of account number <u>XXXX</u>	<u>\$1,082.00</u>
Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt		When was the debt incurred? <u>12/19/2019</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify credit card	

Debtor 1

Veronica Saenz
 First Name Middle Name Last Name

Case number (if known) 22-20164

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.

Total claim

4.25	TRELLIS COMPANY Nonpriority Creditor's Name PO BOX 83100 Number Street ROUND ROCK, TX 78683 City State ZIP Code	Last 4 digits of account number <u>7809</u> When was the debt incurred? <u>07/30/2019</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input checked="" type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify Educational	<u>\$5,815.00</u>
4.26	TRELLIS COMPANY Nonpriority Creditor's Name 1609 CENTRE CREEK DRIVE Number Street AUSTIN, TX 78761 City State ZIP Code	Last 4 digits of account number <u>7809</u> When was the debt incurred? <u>08/28/2015</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input checked="" type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify Educational	<u>\$5,815.00</u>
4.27	TRELLIS COMPANY Nonpriority Creditor's Name PO BOX 83100 Number Street ROUND ROCK, TX 78683 City State ZIP Code	Last 4 digits of account number <u>7808</u> When was the debt incurred? <u>07/30/2019</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input checked="" type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify Educational	<u>\$1,435.00</u>

Debtor 1

Veronica Saenz
 First Name Middle Name Last Name

Case number (if known) 22-20164

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.				Total claim
4.28	TRELLIS COMPANY Nonpriority Creditor's Name 1609 CENTRE CREEK DRIVE Number Street AUSTIN, TX 78761 City State ZIP Code	Last 4 digits of account number <u>7808</u> When was the debt incurred? <u>08/28/2015</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,435.00	
	Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt	Type of NONPRIORITY unsecured claim: <input checked="" type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify Educational		
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
4.29	TXU ENERGY Nonpriority Creditor's Name 200 W JOHN CARPENTER FWY Number Street IRVING, TX 75039 City State ZIP Code	Last 4 digits of account number <u>3991</u> When was the debt incurred? <u>08/31/2018</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,669.00	
	Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt	Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify UtilityCompany		
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
4.30	VANCE & HUFFMAN LLC Nonpriority Creditor's Name 55 MONETTE PKWY STE 100 Number Street SMITHFIELD, VA 23430 City State ZIP Code	Last 4 digits of account number <u>5896</u> When was the debt incurred? <u>03/25/2022</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,072.00	
	Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt	Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify FactoringCompanyAccount		
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Debtor 1

Veronica

First Name

Middle Name

Saenz

Last Name

Case number (if known) 22-20164

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.

Total claim

4.31	VANCE & HUFFMAN LLC Nonpriority Creditor's Name 55 MONETTE PKWY STE 100 Number Street SMITHFIELD, VA 23430 City State ZIP Code	Last 4 digits of account number <u>0872</u> When was the debt incurred? <u>11/24/2021</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify FactoringCompanyAccount	<u>\$316.00</u>
4.32	WSTSHMRK Nonpriority Creditor's Name 801 S ABE Number Street SAN ANGELO, TX 76903 City State ZIP Code	Last 4 digits of account number <u>Z009</u> When was the debt incurred? <u>04/20/2016</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify NoteLoan	<u>\$531.00</u>

Debtor 1

Veronica

First Name

Middle Name

Saenz

Last Name

Case number (if known) 22-20164

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

AVANT LLC/WEB BANK

Name

222 N LASALLE ST STE 160

Number Street

CHICAGO, IL 60601

City

State

ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.1 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured ClaimsCAPITAL ONE

Name

PO BOX 31293

Number Street

SALT LAKE CITY, UT 84131

City

State

ZIP Code

Last 4 digits of account number _____

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.2 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

COMENITYCAPITAL/ACADMY

Name

PO BOX 182120

Number Street

COLUMBUS, OH 43218

City

State

ZIP Code

Last 4 digits of account number _____

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.3 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Gold Star Finance

Name

612 West Main

Number Street

Denison, TX 75020

City

State

ZIP Code

Last 4 digits of account number _____

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.7 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

KOHLS/CAPONE

Name

N56 RIDGEWOOD DR

Number Street

MENOMONEE FAL, WI 53051

City

State

ZIP Code

Last 4 digits of account number _____

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.8 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

LACKS VALLEY STORES LT

Name

1300 SAN PATRICIA DR

Number Street

PHARR, TX 78577

City

State

ZIP Code

Last 4 digits of account number _____

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.9 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

LVNV FUNDING LLC

Name

PO BOX 1269

Number Street

GREENVILLE, SC 29602

City

State

ZIP Code

Last 4 digits of account number _____

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.11 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Debtor 1

VeronicaSaenzCase number (if known) 22-20164

First Name Middle Name

Last Name

Part 3: List Others to Be Notified About a Debt That You Already Listed Additional Page

MONTGOMERY WARD

Name
1112 7TH AVE
 Number Street
MONROE, WI 53566
 City State ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.12 of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Navy Army Community Credit Union

Name
4802 Crosstown Expy
 Number Street
Corpus Christi, TX 78415
 City State ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.14 of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Navy Army Community Credit Union

Name
4802 Crosstown Expy
 Number Street
Corpus Christi, TX 78415
 City State ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.15 of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

SYNCB/JCP

Name
PO BOX 965007
 Number Street
ORLANDO, FL 32896
 City State ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.19 of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

SYNCB/SAMS CLUB

Name
PO BOX 965005
 Number Street
ORLANDO, FL 32896
 City State ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.20 of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

TBOM/ATLS/ASPIRE

Name
5 CONCOURSE PKWY STE 400
 Number Street
ATLANTA, GA 30328
 City State ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.21 of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

TBOM/MILESTONE

Name
PO BOX 4499
 Number Street
BEAVERTON, OR 97076
 City State ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.22 of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Debtor 1

Veronica

First Name

Middle Name

Saenz

Last Name

Case number (if known) 22-20164

Part 3: List Others to Be Notified About a Debt That You Already Listed Additional Page

THD/CBNA

Name

PO BOX 6497

Number Street

SIOUX FALLS, SD 57117

City

State ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.23 of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims**THE HOME DEPOT/CBNA**

Name

PO BOX 6497

Number Street

SIOUX FALLS, SD 57117

City

State ZIP Code

Last 4 digits of account number _____

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.24 of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Debtor 1

Veronica

First Name

Saenz

Middle Name

Last Name

Case number (if known) 22-20164

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

Total claims from Part 1

	Total claim
6a. Domestic support obligations	6a. <u>\$0.00</u>
6b. Taxes and certain other debts you owe the government	6b. <u>\$0.00</u>
6c. Claims for death or personal injury while you were intoxicated	6c. <u>\$0.00</u>
6d. Other. Add all other priority unsecured claims. Write that amount here.	6d. + <u>\$4,349.00</u>
6e. Total. Add lines 6a through 6d.	6e. <u>\$4,349.00</u>

Total claims from Part 2

	Total claim
6f. Student loans	6f. <u>\$14,500.00</u>
6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g. <u>\$0.00</u>
6h. Debts to pension or profit-sharing plans, and other similar debts	6h. <u>\$0.00</u>
6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. + <u>\$47,805.00</u>
6j. Total. Add lines 6f through 6i.	6j. <u>\$62,305.00</u>

Fill in this information to identify your case:

Debtor 1	<u>Veronica</u>	<u>Saenz</u>	
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Southern District of Texas</u>		
Case number (if known)	<u>22-20164</u>		

Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

1. Do you have any executory contracts or unexpired leases?

- No. Check this box and file this form with your other schedules. You have nothing else to report on this form.
 Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Property* (Official Form 106A/B).

2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or company with whom you have the contract or lease			State what the contract or lease is for
2.1	Name _____ Number Street _____ City _____ State _____ ZIP Code _____			
2.2	Name _____ Number Street _____ City _____ State _____ ZIP Code _____			
2.3	Name _____ Number Street _____ City _____ State _____ ZIP Code _____			
2.4	Name _____ Number Street _____ City _____ State _____ ZIP Code _____			

Fill in this information to identify your case:

Debtor 1	<u>Veronica</u>	<u>Saenz</u>	
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Southern District of Texas</u>		
Case number (if known)	<u>22-20164</u>		

Check if this is an amended filing

Official Form 106H

Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.)

No
 Yes

2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

No. Go to line 3.
 Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?

No
 Yes. In which community state or territory did you live? Texas. Fill in the name and current address of that person.
Lane, Dominique
Name of your spouse, former spouse, or legal equivalent
525 Poenisch Dr
Number Street
Corpus Christi, TX 78412
City State ZIP Code

3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

	Column 1: Your codebtor	Column 2: The creditor to whom you owe the debt
3.1	<p><u>Lane, Dominique</u> Name <u>525 Poenisch Dr</u> Number Street <u>Corpus Christi, TX 78412</u> City State ZIP Code</p>	<p>Check all schedules that apply:</p> <p><input checked="" type="checkbox"/> Schedule D, line <u>2.1, 2.2</u> <input checked="" type="checkbox"/> Schedule E/F, line <u>2.1, 2.2</u> <input type="checkbox"/> Schedule G, line _____</p>

Fill in this information to identify your case:

Debtor 1	Veronica	Saenz	
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	Southern District of Texas		
Case number (if known)	22-20164		

Check if this is:

- An amended filing
 A supplement showing postpetition chapter 13 income as of the following date:

 MM / DD / YYYY

Official Form 106I**Schedule I: Your Income**

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment**1. Fill in your employment information.**

If you have more than one job, attach a separate page with information about additional employers.

Include part time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

	Debtor 1	Debtor 2 or non-filing spouse
Employment status	<input checked="" type="checkbox"/> Employed <input type="checkbox"/> Not Employed	<input checked="" type="checkbox"/> Employed <input type="checkbox"/> Not Employed
Occupation	Armed Security Officer	
Employer's name	Sec Ops, Inc	
Employer's address	5729 Leopard St Building 8 Number Street	20501 Seneca Meadows Pkwy 300 Number Street
	Corpus Christi, TX 78408 City State Zip Code	Germantown, MD 20876 City State Zip Code
How long employed there?	2 years	

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

	For Debtor 1	For Debtor 2 or non-filing spouse
2. List monthly gross wages, salary, and commissions (before all payroll deductions.) If not paid monthly, calculate what the monthly wage would be.	2. <u>\$2,765.57</u>	<u>\$4,285.72</u>
3. Estimate and list monthly overtime pay.	3. + <u>\$0.00</u>	+ <u>\$0.00</u>
4. Calculate gross income. Add line 2 + line 3.	4. <u>\$2,765.57</u>	<u>\$4,285.72</u>

Debtor 1

Veronica

First Name

Middle Name

Saenz

Last Name

Case number (if known) 22-20164

		For Debtor 1	For Debtor 2 or non-filing spouse
Copy line 4 here.....	→	4. <u>\$2,765.57</u>	<u>\$4,285.72</u>
5. List all payroll deductions:			
5a. Tax, Medicare, and Social Security deductions		5a. <u>\$373.70</u>	<u>\$706.35</u>
5b. Mandatory contributions for retirement plans		5b. <u>\$0.00</u>	<u>\$0.00</u>
5c. Voluntary contributions for retirement plans		5c. <u>\$110.62</u>	<u>\$42.85</u>
5d. Required repayments of retirement fund loans		5d. <u>\$662.48</u>	<u>\$0.00</u>
5e. Insurance		5e. <u>\$108.90</u>	<u>\$0.00</u>
5f. Domestic support obligations		5f. <u>\$0.00</u>	<u>\$0.00</u>
5g. Union dues		5g. <u>\$0.00</u>	<u>\$0.00</u>
5h. Other deductions. Specify: <u>See additional page</u>		5h. + <u>\$64.00</u>	+ <u>\$555.51</u>
6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h.		6. <u>\$1,319.70</u>	<u>\$1,304.71</u>
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.		7. <u>\$1,445.87</u>	<u>\$2,981.01</u>
8. List all other income regularly received:			
8a. Net income from rental property and from operating a business, profession, or farm		8a. <u>\$0.00</u>	<u>\$0.00</u>
Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.			
8b. Interest and dividends		8b. <u>\$0.00</u>	<u>\$0.00</u>
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive		8c. <u>\$0.00</u>	<u>\$0.00</u>
Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.			
8d. Unemployment compensation		8d. <u>\$0.00</u>	<u>\$0.00</u>
8e. Social Security		8e. <u>\$0.00</u>	<u>\$0.00</u>
8f. Other government assistance that you regularly receive		8f. <u>\$0.00</u>	<u>\$1,003.00</u>
Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.			
Specify: <u>VA Benefits</u>			
8g. Pension or retirement income		8g. <u>\$0.00</u>	<u>\$0.00</u>
8h. Other monthly income. Specify: <u>See additional page</u>		8h. + <u>\$0.00</u>	+ <u>\$0.00</u>
9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.		9. <u>\$0.00</u>	<u>\$1,003.00</u>
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse		10. <u>\$1,445.87</u>	+ <u>\$3,984.01</u> = <u>\$5,429.88</u>
11. State all other regular contributions to the expenses that you list in Schedule J.			
Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.			
Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.			
Specify: _____		11. + <u>\$0.00</u>	
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the <i>Summary of Your Assets and Liabilities and Certain Statistical Information</i> , if it applies		12. <u>\$5,429.88</u>	
13. Do you expect an increase or decrease within the year after you file this form?			
<input checked="" type="checkbox"/> No.			
<input type="checkbox"/> Yes. Explain: _____			

Debtor 1

Veronica

First Name

Saenz

Middle Name

Last Name

Case number (if known) 22-20164**1. Employment information for Debtor 1****Occupation****Employer's name**

Kidney Specialists of South

Employer's address

1521 S. Staples Ste. 601 TEXAS PA

Number Street

Corpus Christi, TX 78404

City

State

Zip Code

How long employed there?**Amount****5h. Other Deductions For Debtor 1**

Other

\$64.00

5h. Other Deductions For Debtor 2 or non-filing spouse

Other Court Ordered Payments

\$496.99

Uniform Costs

\$58.52

8h. Other monthly income For Debtor 1

N/A

\$0.00

N/A

\$0.00

N/A

\$0.00

Fill in this information to identify your case:

Debtor 1	Veronica	Saenz	
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	Southern District of Texas		
Case number (if known)	22-20164		

Check if this is:

- An amended filing
 A supplement showing postpetition chapter 13 income as of the following date:
 MM / DD / YYYY

Official Form 106J

Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household

1. Is this a joint case?

- No. Go to line 2.
 Yes. Does Debtor 2 live in a separate household?
 No
 Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2.

2. Do you have dependents?

Do not list Debtor 1 and Debtor 2.

Do not state the dependents' names.

No

Yes. Fill out this information for each dependent.....

Dependent's relationship to Debtor 1 or Debtor 2

Dependent's age

Does dependent live with you?

Child _____ 21 _____

No. Yes.

Child _____ 20 _____

No. Yes.

Relative _____ 21 _____

No. Yes.

Relative _____ 17 _____

No. Yes.

_____ _____ No. Yes.

3. Do your expenses include expenses of people other than yourself and your dependents?

No

Yes

Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.)

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

4. _____ \$1,598.00

If not included in line 4:

- 4a. Real estate taxes
 4b. Property, homeowner's, or renter's insurance
 4c. Home maintenance, repair, and upkeep expenses
 4d. Homeowner's association or condominium dues

Your expenses
4a. _____ \$0.00
4b. _____ \$0.00
4c. _____ \$80.00
4d. _____ \$0.00

Debtor 1

Veronica

First Name

Saenz

Middle Name

Last Name

Case number (if known) 22-20164

			Your expenses
5.	Additional mortgage payments for your residence , such as home equity loans	5.	\$0.00
6.	Utilities:		
6a.	Electricity, heat, natural gas	6a.	\$247.52
6b.	Water, sewer, garbage collection	6b.	\$137.36
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$169.00
6d.	Other. Specify: <u>Cable & Wifi</u>	6d.	\$90.00
7.	Food and housekeeping supplies	7.	\$950.00
8.	Childcare and children's education costs	8.	\$0.00
9.	Clothing, laundry, and dry cleaning	9.	\$259.00
10.	Personal care products and services	10.	\$89.00
11.	Medical and dental expenses	11.	\$50.00
12.	Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12.	\$80.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$230.00
14.	Charitable contributions and religious donations	14.	\$0.00
15.	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.		
15a.	Life insurance	15a.	\$0.00
15b.	Health insurance	15b.	\$0.00
15c.	Vehicle insurance	15c.	\$0.00
15d.	Other insurance. Specify: <u> </u>	15d.	\$0.00
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: <u> </u>	16.	\$0.00
17.	Installment or lease payments:		
17a.	Car payments for Vehicle 1	17a.	\$0.00
17b.	Car payments for Vehicle 2	17b.	\$0.00
17c.	Other. Specify: <u>Other Payments</u>	17c.	\$0.00
17d.	Other. Specify: <u>Recreational Vehicle</u>	17d.	\$0.00
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$0.00
19.	Other payments you make to support others who do not live with you. Specify: <u> </u>	19.	\$0.00
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.		
20a.	Mortgages on other property	20a.	\$0.00
20b.	Real estate taxes	20b.	\$0.00
20c.	Property, homeowner's, or renter's insurance	20c.	\$0.00
20d.	Maintenance, repair, and upkeep expenses	20d.	\$0.00
20e.	Homeowner's association or condominium dues	20e.	\$0.00

Debtor 1

<u>Veronica</u>	<u>Saenz</u>
First Name	Middle Name
	Last Name

Case number (if known) 22-2016421. Other. Specify: D2 SS Exempt Income21. + \$700.00

22. Calculate your monthly expenses.

22a. Add lines 4 through 21.

22a. \$4,679.88

22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2

22b. \$0.00

22c. Add line 22a and 22b. The result is your monthly expenses.

22c. \$4,679.88

23. Calculate your monthly net income.

23a. Copy line 12 (your combined monthly income) from Schedule I.

23a. \$5,429.88

23b. Copy your monthly expenses from line 22c above.

23b. - \$4,679.88

23c. Subtract your monthly expenses from your monthly income.

23c. \$750.00The result is your *monthly net income*.

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

 No.

None

 Yes.

Fill in this information to identify your case:

Debtor 1	<u>Veronica</u>	<u>Saenz</u>	
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Southern District of Texas</u>		
Case number (if known)	<u>22-20164</u>		

Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Part 1: Summarize Your Assets

Your assets

Value of what you own

1. Schedule A/B: Property (Official Form 106A/B)

1a. Copy line 55, Total real estate, from <i>Schedule A/B</i>	\$231,657.00
1b. Copy line 62, Total personal property, from <i>Schedule A/B</i>	\$51,102.61
1c. Copy line 63, Total of all property on <i>Schedule A/B</i>	\$282,759.61

Part 2: Summarize Your Liabilities

Your liabilities

Amount you owe

2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)

2a. Copy the total you listed in Column A, <i>Amount of claim</i> , at the bottom of the last page of Part 1 of <i>Schedule D</i>	\$240,680.05
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3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)

3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of <i>Schedule E/F</i>	\$4,349.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of <i>Schedule E/F</i>	+ \$62,305.00

Your total liabilities

\$307,334.05

Part 3: Summarize Your Income and Expenses

4. Schedule I: Your Income (Official Form 106I)

Copy your combined monthly income from line 12 of <i>Schedule I</i>	\$5,429.88
---	------------

5. Schedule J: Your Expenses (Official Form 106J)

Copy your monthly expenses from line 22c of <i>Schedule J</i>	\$4,679.88
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Debtor 1

Veronica

First Name

Saenz

Middle Name

Last Name

Case number (if known) 22-20164

Part 4: Answer These Questions for Administrative and Statistical Records

6. Are you filing for bankruptcy under Chapters 7, 11, or 13?

- No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
- Yes

7. What kind of debt do you have?

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

8. From the **Statement of Your Current Monthly Income**: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

\$7,623.04

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

Total claim

From Part 4 on Schedule E/F, copy the following:

9a. Domestic support obligations (Copy line 6a.) \$0.009b. Taxes and certain other debts you owe the government. (Copy line 6b.) \$0.009c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) \$0.009d. Student loans. (Copy line 6f.) \$14,500.009e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) \$0.009f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) + \$0.009g. **Total.** Add lines 9a through 9f. \$14,500.00

Fill in this information to identify your case:

Debtor 1	<u>Veronica</u>	<u>Saenz</u>	
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Southern District of Texas</u>		
Case number (if known)	<u>22-20164</u>		

Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

- No
- Yes. Name of person _____ Attach *Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)*.

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

X /s/ Veronica Saenz
Veronica Saenz, Debtor 1

Date 07/09/2022
MM/ DD/ YYYY

Fill in this information to identify your case:

Debtor 1	Veronica	Saenz
	First Name	Middle Name
	Last Name	
Debtor 2 (Spouse, if filing)		
	First Name	Middle Name
	Last Name	
United States Bankruptcy Court for the:	Southern District of Texas	
Case number (if known)	22-20164	

Check if this is an amended filing

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

04/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Give Details About Your Marital Status and Where You Lived Before

1. What is your current marital status?

Married

Not married

2. During the last 3 years, have you lived anywhere other than where you live now?

No

Yes. List all of the places you lived in the last 3 years. Do not include where you live now.

Debtor 1:	Dates Debtor 1 lived there	Debtor 2:	Dates Debtor 2 lived there
4809 Larcade dr Number Street	From <u>04/21/2019</u> To <u>02/01/2020</u>	<input type="checkbox"/> Same as Debtor 1	<input type="checkbox"/> Same as Debtor 1 From _____ To _____
Corpus Christi, TX 78415 City State ZIP Code	Number Street	City	State ZIP Code
4833 Kendall Dr Corpus Christi Texas 78415 Number Street	From <u>02/01/2020</u> To <u>04/22/2022</u>	<input type="checkbox"/> Same as Debtor 1	<input type="checkbox"/> Same as Debtor 1 From _____ To _____
Corpus Christi, TX 78415 City State ZIP Code	Number Street	City	State ZIP Code

3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

No

Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).

Debtor 1 **Veronica** **Saenz** **Case number (if known)** 22-20164

Part 2: Explain the Sources of Your Income

4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?

Fill in the total amount of income you received from all jobs and all businesses, including part-time activities

If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.

	Debtor 1	Debtor 2		
	Sources of income Check all that apply.	Gross Income (before deductions and exclusions)		
	Sources of income Check all that apply.	Gross Income (before deductions and exclusions)		
From January 1 of current year until the date you filed for bankruptcy:	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	\$19,359.00	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	\$30,000.07
For last calendar year: (January 1 to December 31, <u>2021</u>) YYYY	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	\$31,312.00	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	\$53,597.00
For the calendar year before that: (January 1 to December 31, <u>2020</u>) YYYY	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	\$28,591.00	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	\$49,769.00

5. Did you receive any other income during this year or the two previous calendar years?

Include income regardless of whether that income is taxable. Examples of *other income* are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.

	Debtor 1	Debtor 2	
Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross Income from each source (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy: <hr/> <hr/> <hr/>	<hr/> <hr/> <hr/>	<hr/> <hr/> <hr/>	<hr/> <hr/> <hr/>
For last calendar year: (January 1 to December 31, <u>2021</u>) YYYY <hr/> <hr/> <hr/>	<hr/> <hr/> <hr/>	<hr/> <hr/> <hr/>	<hr/> <hr/> <hr/>
For the calendar year before that: (January 1 to December 31, <u>2020</u>) YYYY <hr/> <hr/> <hr/>	<hr/> <hr/> <hr/>	<hr/> <hr/> <hr/>	<hr/> <hr/> <hr/>

Debtor 1 **Veronica Saenz**
 First Name Middle Name Last Name Case number (if known) 22-20164

Part 3: List Certain Payments You Made Before You Filed for Bankruptcy

6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts?

No. **Neither Debtor 1 nor Debtor 2 has primarily consumer debts.** Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$7,575* or more?

No. Go to line 7.

Yes. List below each creditor to whom you paid a total of \$7,575* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

* Subject to adjustment on 4/01/25 and every 3 years after that for cases filed on or after the date of adjustment.

Yes. **Debtor 1 or Debtor 2 or both have primarily consumer debts.**

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

No. Go to line 7.

Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

Dates of payment	Total amount paid	Amount you still owe	Was this payment for...
_____ Creditor's Name	_____ _____	_____	<input type="checkbox"/> Mortgage <input type="checkbox"/> Car <input type="checkbox"/> Credit card <input type="checkbox"/> Loan repayment <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Other _____
Number Street _____ _____	_____ _____	_____	
City _____ State _____ ZIP Code _____			

7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?

Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.

No

Yes. List all payments to an insider.

Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
_____ Insider's Name	_____ _____	_____	_____
Number Street _____ _____	_____ _____	_____	_____
City _____ State _____ ZIP Code _____			

Debtor 1 Veronica Saenz Case number (if known) 22-20164
 First Name Middle Name Last Name

8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?
 Include payments on debts guaranteed or cosigned by an insider.

No

Yes. List all payments that benefited an insider.

Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name
Insider's Name			
Number Street			
City State ZIP Code			

Part 4: Identify Legal Actions, Repossessions, and Foreclosures

9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding?

List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.

No

Yes. Fill in the details.

Nature of the case	Court or agency	Status of the case
Case title _____ _____ _____	Court Name _____ _____ _____	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
Case number _____ _____ _____	Number Street _____ _____ _____	City State ZIP Code _____ _____ _____

10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied?

Check all that apply and fill in the details below.

No. Go to line 11.

Yes. Fill in the information below.

ARCPE 1,LLC
Creditor's Name

1900 Sunset Harbour Dr 2nd Floor
Number Street

Miami Beach, FL 33139
City State ZIP Code

Describe the property	Date	Value of the property
252 Poenisch Dr., Corpus Christi, Texas 78412	6/7/2022	\$231,657.00
Explain what happened		
<input type="checkbox"/> Property was repossessed. <input checked="" type="checkbox"/> Property was foreclosed. <input type="checkbox"/> Property was garnished. <input type="checkbox"/> Property was attached, seized, or levied.		

Debtor 1 Veronica Saenz Case number (if known) 22-20164
 First Name Middle Name Last Name

11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?

No

Yes. Fill in the details.

Creditor's Name	Describe the action the creditor took	Date action was taken	Amount taken
Number Street			
City State ZIP Code	Last 4 digits of account number: XXXX-_____		

12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?

No

Yes

Part 5: List Certain Gifts and Contributions

13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?

No

Yes. Fill in the details for each gift.

Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
Person to Whom You Gave the Gift			
Number Street			
City State ZIP Code			
Person's relationship to you			

14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?

No

Yes. Fill in the details for each gift or contribution.

Debtor 1 Veronica Saenz Case number (if known) 22-20164

First Name	Middle Name	Last Name	Date you contributed	Value
Gifts or contributions to charities that total more than \$600			Describe what you contributed	
Charity's Name				
Number Street				
City	State	ZIP Code		

Part 6: List Certain Losses

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?

No

Yes. Fill in the details.

Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss	Date of your loss	Value of property lost
Include the amount that insurance has paid. List pending insurance claims on line 33 of <i>Schedule A/B: Property</i> .			

Part 7: List Certain Payments or Transfers

16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?

Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.

No

Yes. Fill in the details.

Raub Law Firm	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
Person Who Was Paid	Attorney's Fee; Filing Fee; Credit Report	7/8/2022	\$2,349.00
814 Leopard Number Street		07/08/2022	\$313.00
		07/08/2022	\$38.00
Corpus Christi, TX 78401 City State ZIP Code			
bk@raublawfirm.com Email or website address			
Debtor Person Who Made the Payment, if Not You			

Debtor 1 **Veronica Saenz** Case number (if known) 22-20164

First Name Veronica Middle Name Last Name Saenz

Description and value of any property transferred			Date payment or transfer was made	Amount of payment
<u>Allen Credit & Debt Counseling</u>				
Person Who Was Paid	Credit Counseling Certificate		<u>7/8/2022</u>	<u>\$20.00</u>
<u>387th Ave</u>				
Number Street				
<u>Wolsey, SD 57384</u>				
City	State	ZIP Code		
Email or website address				
<u>n/a</u>				
Person Who Made the Payment, if Not You				

17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?
Do not include any payment or transfer that you listed on line 16.

No

Yes. Fill in the details.

Description and value of any property transferred			Date payment or transfer was made	Amount of payment
Person Who Was Paid				
Number Street				
City	State	ZIP Code		

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?

Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property).
Do not include gifts and transfers that you have already listed on this statement.

No

Yes. Fill in the details.

Description and value of property transferred	Describe any property or payments received or debts paid in exchange	Date transfer was made
Person Who Received Transfer		
Number Street		
City	State	ZIP Code

Person's relationship to you _____

Debtor 1 Veronica Saenz Case number (if known) 22-20164
 First Name Middle Name Last Name

19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)

No

Yes. Fill in the details.

Description and value of the property transferred	Date transfer was made
Name of trust _____	_____
_____	_____

Part 8: List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units

20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.

No

Yes. Fill in the details.

Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
Name of Financial Institution	XXXX- _____	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other _____	_____
Number Street			_____
City	State ZIP Code		

21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?

No

Yes. Fill in the details.

Who else had access to it?	Describe the contents	Do you still have it?
Name of Financial Institution	Name _____	<input type="checkbox"/> No <input type="checkbox"/> Yes
Number Street	Number Street _____	
City	State ZIP Code	

Debtor 1 Veronica Saenz Case number (if known) 22-20164
 First Name Middle Name Last Name

22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?

No

Yes. Fill in the details.

		Who else has or had access to it?	Describe the contents	Do you still have it?
Name of Storage Facility	Name			<input type="checkbox"/> No <input type="checkbox"/> Yes
Number Street	Number	Street		
City	State	ZIP Code		

Part 9: Identify Property You Hold or Control for Someone Else

23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.

No

Yes. Fill in the details.

		Where is the property?	Describe the property	Value
Dominique A. Lane Owner's Name	Number Street		2011 Audi A6, 96000 miles	\$12,925.00
1802 Ennis Joslin 246 Number Street				
	City	State ZIP Code		
Corpus Christi, TX 78413 City State ZIP Code				

Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

- *Environmental law* means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- *Site* means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- *Hazardous material* means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?

No

Yes. Fill in the details.

Debtor 1 Veronica Saenz Case number (if known) 22-20164

First Name	Middle Name	Last Name	Governmental unit	Environmental law, if you know it	Date of notice
Name of site		Governmental unit			
Number	Street	Number	Street		
		City	State	ZIP Code	
City		State	ZIP Code		

25. Have you notified any governmental unit of any release of hazardous material?

No

Yes. Fill in the details.

Governmental unit	Environmental law, if you know it	Date of notice			
Name of site		Governmental unit			
Number	Street	Number	Street		
		City	State	ZIP Code	
City		State	ZIP Code		

26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

No

Yes. Fill in the details.

Court or agency	Nature of the case	Status of the case			
Case title		Court Name			
				<input type="checkbox"/> Pending	
				<input type="checkbox"/> On appeal	
				<input type="checkbox"/> Concluded	
Case number	Number	Street			
City		State	ZIP Code		

Debtor 1 Veronica Saenz Case number (if known) 22-20164
 First Name Middle Name Last Name

Part 11: Give Details About Your Business or Connections to Any Business

27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?

- A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time
- A member of a limited liability company (LLC) or limited liability partnership (LLP)
- A partner in a partnership
- An officer, director, or managing executive of a corporation
- An owner of at least 5% of the voting or equity securities of a corporation

No. None of the above applies. Go to Part 12.

Yes. Check all that apply above and fill in the details below for each business.

Name _____	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
Number Street _____		EIN: _____
City _____ State _____ ZIP Code _____	Name of accountant or bookkeeper	Dates business existed
		From _____ To _____

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.

No

Yes. Fill in the details below.

Date issued
Name _____ MM / DD / YYYY
Number Street _____
City _____ State _____ ZIP Code _____

Debtor 1

Veronica

First Name

Saenz

Middle Name

Last Name

Case number (if known) 22-20164

Part 12: Sign Below

I have read the answers on this ***Statement of Financial Affairs*** and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

 /s/ Veronica Saenz

Signature of Veronica Saenz, Debtor 1

Date 07/09/2022

Did you attach additional pages to your ***Statement of Financial Affairs for Individuals Filing for Bankruptcy*** (Official Form 107)?

No

Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

No

Yes. Name of person _____

Attach the ***Bankruptcy Petition Preparer's Notice, Declaration, and Signature*** (Official Form 119).

Fill in this information to identify your case:

Debtor 1	Veronica	Saenz	
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	Southern District of Texas		
Case number (if known)	22-20164		

Check as directed in lines 17 and 21:

According to the calculations required by this Statement:

- 1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).
- 2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).
- 3. The commitment period is 3 years.
- 4. The commitment period is 5 years.

Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

10/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1: Calculate Your Average Monthly Income

1. What is your marital and filing status? Check one only.

- Not married. Fill out Column A, lines 2-11.
- Married. Fill out both Columns A and B, lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

	Column A Debtor 1	Column B Debtor 2 or non-filing spouse
2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions).	\$2,986.50	\$4,636.54
3. Alimony and maintenance payments. Do not include payments from a spouse.	\$0.00	\$0.00
4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Do not include payments from a spouse. Do not include payments you listed on line 3.	\$0.00	\$0.00
5. Net income from operating a business, profession, or farm	Debtor 1 Gross receipts (before all deductions) <u>\$0.00</u> Ordinary and necessary operating expenses <u>\$0.00</u> Net monthly income from a business, profession, or farm <u>\$0.00</u>	Debtor 2 <u>\$0.00</u> <u>\$0.00</u> <u>\$0.00</u> Copy here → <u>\$0.00</u> <u>\$0.00</u>
6. Net income from rental and other real property	Debtor 1 Gross receipts (before all deductions) <u>\$0.00</u> Ordinary and necessary operating expenses <u>\$0.00</u> Net monthly income from rental or other real property <u>\$0.00</u>	Debtor 2 <u>\$0.00</u> <u>\$0.00</u> <u>\$0.00</u> Copy here → <u>\$0.00</u> <u>\$0.00</u>

Debtor 1

Veronica

First Name

Saenz

Middle Name

Last Name

Case number (if known) 22-20164

	Column A Debtor 1	Column B Debtor 2 or non-filing spouse
7. Interest, dividends, and royalties	\$0.00	\$0.00
8. Unemployment compensation	\$0.00	\$0.00
Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: ↓		
For you.....	\$0.00	
For your spouse.....	\$0.00	
9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to the extent that it does not exceed the amount of retired pay to which you would otherwise be entitled if retired under any provision of title 10 other than chapter 61 of that title.	\$0.00	\$0.00
10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act; payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below.		
N/A	\$0.00	\$0.00
N/A	\$0.00	\$0.00
Total amounts from separate pages, if any.	+ \$0.00	+ \$0.00
	\$2,986.50	+ \$4,636.54 = \$7,623.04
11. Calculate your total average monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.		Total average monthly income
Part 2: Determine How to Measure Your Deductions from Income		
12. Copy your total average monthly income from line 11.	\$7,623.04	
13. Calculate the marital adjustment. Check one:		
<input type="checkbox"/> You are not married. Fill in 0 below.		
<input type="checkbox"/> You are married and your spouse is filing with you. Fill in 0 below.		
<input checked="" type="checkbox"/> You are married and your spouse is not filing with you.		
Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents.		
Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page.		
If this adjustment does not apply, enter 0 below.		
_____		_____
_____		_____
_____		+ _____
Total.....	\$0.00	Copy here. → - \$0.00
14. Your current monthly income. Subtract the total in line 13 from line 12.	\$7,623.04	

Debtor 1

Veronica Saenz
 First Name Middle Name Last Name

Case number (if known) 22-20164**15. Calculate your current monthly income for the year.** Follow these steps:

15a. Copy line 14 here → \$7,623.04

Multiply line 15a by 12 (the number of months in a year). x 12

15b. The result is your current monthly income for the year for this part of the form. \$91,476.48

16. Calculate the median family income that applies to you. Follow these steps:

16a. Fill in the state in which you live. Texas

16b. Fill in the number of people in your household. 6

16c. Fill in the median family income for your state and size of household. \$113,186.00

To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.

17. How do the lines compare?

- 17a. Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, *Disposable income is not determined under 11 U.S.C. § 1325(b)(3)*. Go to Part 3. Do NOT fill out *Calculation of Your Disposable Income* (Official Form 122C-2).
- 17b. Line 15b is more than line 16c. On the top of page 1 of this form, check box 2, *Disposable income is determined under 11 U.S.C. § 1325(b)(3)*. Go to Part 3 and fill out *Calculation of Your Disposable Income* (Official Form 122C-2). On line 39 of that form, copy your current monthly income from line 14 above.

Part 3: Calculate Your Commitment Period Under 11 U.S.C. §1325(b)(4)

18. Copy your total average monthly income from line 11. \$7,623.04

19. Deduct the marital adjustment if it applies. If you are married, your spouse is not filing with you, and you contend that calculating the commitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's income, copy the amount from line 13.

19a. If the marital adjustment does not apply, fill in 0 on line 19a. - \$0.00

19b. Subtract line 19a from line 18. \$7,623.04

20. Calculate your current monthly income for the year. Follow these steps.

20a. Copy line 19b. \$7,623.04

Multiply by 12 (the number of months in a year). x 12

20b. The result is your current monthly income for the year for this part of the form. \$91,476.48

20c. Copy the median family income for your state and size of household from line 16c. \$113,186.00

21. How do the lines compare?

- 21a. Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, *The commitment period is 3 years*. Go to Part 4.
- 21b. Line 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4, *The commitment period is 5 years*. Go to Part 4.

Part 4: Sign Below

By signing here, under penalty of perjury I declare that the information on this statement and in any attachments is true and correct.

 /s/ Veronica Saenz
 Signature of Debtor 1

Date 07/09/2022
 MM/ DD/ YYYY

If you checked 17a, do NOT fill out or file Form 122C-2.

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

Debtor 1

Veronica Saenz
First Name Middle Name Last Name

Case number (if known) 22-20164**Additional Page For 122C-1**

10. Cont.

	<i>Column A</i> Debtor 1	<i>Column B</i> Debtor 2 or non-filing spouse
N/A	\$0.00	\$0.00

Debtor 1 Saenz, VeronicaCase number (if known) 22-20164**Current Monthly Income Details for the Debtor(s)****Debtor 1 Income Details:**Income for the Period **01/01/2022 to 07/01/2022.****Employment Income**Source of Income: **Employment Income**

Income by Month:

6 Months ago	<u>01/2022</u>	\$2,574.00
5 Months ago	<u>02/2022</u>	\$2,776.50
4 Months ago	<u>03/2022</u>	\$4,180.50
3 Months ago	<u>04/2022</u>	\$2,880.00
2 Months ago	<u>05/2022</u>	\$2,731.50
Last Month	<u>06/2022</u>	\$2,776.50

Interest and DividendsSource of Income: **N/A**

Income by Month:

6 Months ago	<u>01/2022</u>	\$0.00
5 Months ago	<u>02/2022</u>	\$0.00
4 Months ago	<u>03/2022</u>	\$0.00
3 Months ago	<u>04/2022</u>	\$0.00
2 Months ago	<u>05/2022</u>	\$0.00
Last Month	<u>06/2022</u>	\$0.00

Pension or Retirement IncomeSource of Income: **N/A**

Income by Month:

6 Months ago	<u>01/2022</u>	\$0.00
5 Months ago	<u>02/2022</u>	\$0.00
4 Months ago	<u>03/2022</u>	\$0.00
3 Months ago	<u>04/2022</u>	\$0.00
2 Months ago	<u>05/2022</u>	\$0.00
Last Month	<u>06/2022</u>	\$0.00

Alimony and Maintenance PaymentsSource of Income: **N/A**

Income by Month:

6 Months ago	<u>01/2022</u>	\$0.00
5 Months ago	<u>02/2022</u>	\$0.00
4 Months ago	<u>03/2022</u>	\$0.00
3 Months ago	<u>04/2022</u>	\$0.00
2 Months ago	<u>05/2022</u>	\$0.00
Last Month	<u>06/2022</u>	\$0.00

Social Security IncomeSource of Income: **N/A**

Income by Month:

6 Months ago	<u>01/2022</u>	\$0.00
5 Months ago	<u>02/2022</u>	\$0.00
4 Months ago	<u>03/2022</u>	\$0.00
3 Months ago	<u>04/2022</u>	\$0.00
2 Months ago	<u>05/2022</u>	\$0.00
Last Month	<u>06/2022</u>	\$0.00

Regular Contributions to HouseholdSource of Income: **N/A**

Income by Month:

6 Months ago	<u>01/2022</u>	\$0.00
5 Months ago	<u>02/2022</u>	\$0.00
4 Months ago	<u>03/2022</u>	\$0.00
3 Months ago	<u>04/2022</u>	\$0.00
2 Months ago	<u>05/2022</u>	\$0.00
Last Month	<u>06/2022</u>	\$0.00

Income from All Other SourcesSource of Income: **N/A**

Income by Month:

6 Months ago	<u>01/2022</u>	Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period
5 Months ago	<u>02/2022</u>	\$0.00
4 Months ago	<u>03/2022</u>	\$0.00

3 Months ago
2 Months ago
Last Month

04/2022
05/2022
06/2022

\$0.00
\$0.00
\$0.00

Income from All Other Sources

Source of Income: N/A

Income by Month:

6 Months ago	01/2022	\$0.00
5 Months ago	02/2022	\$0.00
4 Months ago	03/2022	\$0.00
3 Months ago	04/2022	\$0.00
2 Months ago	05/2022	\$0.00
Last Month	06/2022	\$0.00

Income from All Other Sources

Source of Income: N/A

Income by Month:

6 Months ago	01/2022	\$0.00
5 Months ago	02/2022	\$0.00
4 Months ago	03/2022	\$0.00
3 Months ago	04/2022	\$0.00
2 Months ago	05/2022	\$0.00
Last Month	06/2022	\$0.00

Non-filing Spouse Income Details:

Income for the Period 01/01/2022 to 07/01/2022.

Employment Income

Source of Income: Employment Income Income

Income by Month:

6 Months ago	01/2022	\$4,228.82
5 Months ago	02/2022	\$4,228.83
4 Months ago	03/2022	\$4,228.81
3 Months ago	04/2022	\$6,409.61
2 Months ago	05/2022	\$4,361.60
Last Month	06/2022	\$4,361.60

Other Government Assistance

Source of Income: VA Benefits

Income by Month:

6 Months ago	01/2022	\$0.00
5 Months ago	02/2022	\$0.00
4 Months ago	03/2022	\$0.00
3 Months ago	04/2022	\$0.00
2 Months ago	05/2022	\$0.00
Last Month	06/2022	\$0.00